_	Substitute for Form PTO-875							Application or Docket Number 09886346		
<i>,</i>	CLAIMS AS FILED - PART I (Column 1) (Column 2)					SMALL ENTITY		OR OTHER THA		R THAN ENTITY
	FOR	NUM	NUMBER FILED		BER EXTRA	RATE	FEE	1	RATE	T
	ASIC FEE							1	KAIE	FEE
	7 CFR 1.16(a))		,	<del></del>			<u> </u>	OR	<u></u>	1.710
(3	7 CFR 1.16(c))	21	minus 2	20 = '		x \$=		OR	x s 18 =	18
	INDEPENDENT CLAIMS (37 CFR 1.16(b))  2 minus 3		3 = .	·	X \$ =		OR	X \$ =		
I & State	II TIDI E DEDEND	ENT CLAIM PRESE	ACT	/27 CSD + 46/4W			<del>- </del>	1		<del> </del>
	OCTIFICE DEFEND	EN CLAIM FRESE		(37 CFR 1.16(d))		+ \$ =	<u> </u>	OR	+ 5=	ļ
AVAILAB	f the difference in	column 1 is less It	ian;zero, e	enter °C in column	2.	TOTAL		OR	TOTAL	896
		LAIMS AS AN	ENDE	) PART II				_		
	آدء ارد 7	· ·	ICINOCE	) - FANT II						
<b>E</b>	X-24-04	(Column 1)			(Column 2) (Column 3)		SMALL ENTITY			R THAN ENTITY
かく	B .	REMAINING		HIGHEST NUMBER	PRESENT	RATE	ADDI-		RATE	ADDI
の ENTA		AFTER AMENDMENT		PREVIOUSLY PAID FOR	EXTRA		TIONAL			TIONA
DMG	Total (37 CFR 1.16(c))	21	Minus	" 21	=	v	1			
END	Independent	. 3	Minus	" 3	╅┋┈╌┤	X \$=	<del>                                     </del>	OR	× \$=	
AME	(37 CFR 1,16(b))		<u> </u>	1		x s=	<del> </del>	OR	x \$=	<b> </b>
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$=		OR	+5 =	
					- <del></del>	TOTAL		OB	TOTAL	
1	3-2-05					ADD'L FEE	<u> </u>	OR	ADD'L FEE	Ц
<u> </u>	200	(Column 1)	<del></del>	(Column 2)	(Column 3)		·	ı		
m		CLAIMS REMAINING		HIGHEST NUMBER	. PRESENT	RATE	ADDI-		RATE	ADDI
Ξ		AFTER AMENDMENT		PREVIOUSLY PAID FOR	EXTRA		TIONAL FEE			TIONA FEE
ENDMENT	Total (37 CFR 1.16(c))	. 21	Minus	11	=		,,,,,		2.5	100
2	Independent	. 0	Minus	0	-	× \$=		OR	x s=	
Ξ E	(37 CFR 1.16(b))	2	l	3		x \$=		OR	x s=	·
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+5 =		OR	+s =	
				<del></del>	<del></del>	TOTAL			TOTAL	<del></del>
				4.5		ADD'L FEE		OR	ADD'L FEE	L
_	,	(Column 1)		(Column 2)	(Column 3)	<u> </u>				
٦ ۲		CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL		RATE	ADDI TIONA
<u>u</u>	Tatal	AMENDMENT		PAID FOR			FEE			FEE
Ž O	Total (37 CFR 1.16(c))		Minus		=	x \$=		OR	x \$=	ĺ
AMENDMENT	Independent (37 CFR 1.16(6))	•	Minus .	:	=	x \$=		OR	x s =	
A	FIRST PRESENT	ATION OF MULTIPLE	DEPENDE	NT CLAIM (37 CF	R 1 16/4/1			0.5		

TOTAL

ADD'L FEE

TOTAL

ADD'L FEE

OR

<sup>•</sup> If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.